

INDIVIDUAL PAYROLL RECORD

Year _____

Employee Name _____ Social Security No. _____ Marital Status _____ Exemption Allowance(s) _____

Address _____ Position _____ Exempt from federal income tax withholding? Yes _____ No _____

_____ Phone No. _____ Rate: Hourly \$ _____ Weekly \$ _____ Monthly \$ _____

[illegible]